

Florida Department of State

Division of Corporations Public Access System

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To:

Division of Corporations

Fax Number : (850)205-0383

From:

Account Name : KRAMER, GREEN, ZUCKERMAN & KAHN, P.A.

Account Number : 073707002173 Phone : (954)965-2112 Fax Number : (954)981-1605

FLORIDA LIMITED PARTNERSHIP

S.M.I.G. MANAGEMENT, LTD.

Certificate of Status	0
Certified Copy	1
Page Count	24 5
Estimated Charge	\$157.50

SECNETARY OF STATE TALLAHASSEE, FLORIDA

P.02/05



FLORIDA DEPARTMENT OF STATE Ken Defaner Secretary of State

03 FEB 24 PM 3:37 SECRETARY OF STATE TALLAHASSEE, FLORIDA

FILED

February 24, 2003

KRAMER, GREEN ZUCKERMAN & KAHN, P.A.

SUBJECT: S.M.I.G. MANAGEMENT, LTD.

REF: W03000005263

We received your electronically transmitted document. However, the document has not been filed. Please make the following corrections and refax the complete document, including the electronic filing cover sheet.

Pursuant to section 620.108, Florida Statutes, an affidavit declaring the amount of the capital contributions of the limited partners and the amount anticipated to be contributed by the limited partners must accompany the certificate of limited partnership. The affidavit must be signed by all general partners.

Please return your document, along with a copy of this letter, within 60 days or your filing will be considered abandoned.

If you have any questions concerning the filling of your document, please call (850) 245-6094.

Agnes Lunt Document Specialist FAX Aud. #: H03000059968 Letter Number: 503A00011758

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P.04/06

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CERTIFICATE OF LIMITED PARTNERSHIP

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SECRETARY OF STATE

Pursuant to Section 620.108 of the Florida Statutes, the following statement is made: FLORIDA

- 1. The name of the Limited Partnership is S.M.I.G. MANAGEMENT, LTD.
- 2. The address of the office and the name and address of the agent for service of process required to be maintained by Section 620,105 of the Florida Statutes is:

Robert M. Kramer KRAMER, GREEN, ZUCKERMAN, GREENE & BUCHSBAUM, P.A. 4000 Hollywood Blvd., Suite 485 South Hollywood, Florida 33021

3. The name and business address of each General Partner is:

JOHN T. GRIGG 9750 NW 33rd Street Suite 113 Coral Springs, FL 33065

4. The mailing address and street address for the Limited Partnership is:

c/o John T. Grigg 9750 NW 33rd Street Suite 113 Coral Springs, FL 33065

5. The latest date upon which the Limited Partnership is to dissolve is December 31, 2038.

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SLUNE I ARY OF STATE
[ALLAHASSEE, FLORIDA

STATE OF FLORIDA }
COUNTY OF BROWARD }

IHEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared JOHN T. GRIGG, General Partner of S.M.I.G. MANAGEMENT, LTD., to me known to be the person described in and who executed the foregoing Certificate of Limited Partnership and he acknowledged before me that he executed the same. He is personally known to me or produced _______ as identification and he took an oath.

WITNESS my hand and official seal in the County and State last aforesaid this // day

NOTARY PUBLIC

Printed Name of Notary Public

My Commission Expires:

626.06

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Roseann Canora MY COMMISSION # DD124623 EXPIRES June 26, 2006 EONSEDTIREUTICOYEUN INSURANCE, INC.

K:\BOB\GRIGG\\$MIG\Certificate,LPS.frm

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ACKNOWLEDGMENT OF APPOINTMENT OF REGISTERED AGENT

SEURLIARY OF STATE TALLAHASSEE, FLORIDA

S.M.I.G. MANAGEMENT, LTD

The undersigned, having been named the Registered Agent for the above Limited Partnership at 4000 Hollywood Boulevard, Suite 485 South, Hollywood, Florida 33021, the undersigned hereby accepts the same and agrees to act in this capacity and agrees to comply with the provisions of Florida law relative to keeping the registered office open.

Dated: PBRUARY 2 200

REGISTERED AGENT:

ROBERT M. KRAMER

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LIMITED PARTNERSHIP AFFIDAVIT

03 FEB 24 PM 3: 37

SECRETARY OF STATE TALLAHASSEE, FLORIDA

STATE OF FLORIDA

Pursuant to Section 620.108 of the Florida Statutes, the following statement is made:

- 1. The undersigned is the sole General Partner of S.M.I.G. MANAGEMENT, LTD.
- 2. The amount of the original capital contributions of the Limited Partners is \$990.00. The additional amount anticipated to be contributed by the Limited Partners is \$0.

FURTHER AFFIANT SAYETH NAUGHT.

JOHN T. GRIGG

STATE OF FLORIDA

COUNTY OF BROWARD

I HEREBY CERTIFY that on this day, before me, an officer duly authorized in the State aforesaid and in the County aforesaid to take acknowledgments, personally appeared JOHN T. GRIGG, General Partner, of S.M.I.G. MANAGEMENT, LTD, to me known to be the persons described in and who executed the foregoing Limited Partnership Affidavit and he acknowledged before me that he executed the same. He is personally known to me or who did produce _______ as identification and he did take an oath.

WITNESS my hand and official seal in the County and State last aforesaid this //

day of folian, 2003.

NOTARY PUBLIC

K:\BOB\GRIGG\SMIG\Affidavit.LPS.frm

